ISSUE SLIP STAPLE AREA (for additional cross references) INITIALS · ID NO. POSITION DATE **FEE DETERMINATION** O.I.P.E. CLASSIFIER **FORMALITY REVIEW** INDEX OF CLAIMS IDS on shelf . Rejected ..... Allowed (Through numeral) Canceled Date Date Claim Date 114 115 117 110 1113 120 121 123 127 129 130 32 33 133 134 135 136 137 138 141 142 14 45 145 46 47 97 N 48 98 ~ 49 If more than 150 claims or 10 actions stapl additional sheet here

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